

UNCLASSIFIED/

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THIS MESSAGE HAS BEEN TRANSMITTED BY USAITA ON BEHALF OF THE  
SURGEON GENERAL//DASG-HCA/DAMO-DASG//

SUBJECT: 2013-2014 SEASONAL INFLUENZA VACCINATION PROGRAM (U)

REFERENCES.

REF/A/AR 40-562/IMMUNIZATIONS AND CHEMOPROPHYLAXIS/29SEP06//

REF/B/ASD(HA)MEMORANDUM/SUBJECT: POLICY FOR USE OF INFLUENZA  
VACCINE FOR THE 2013-2014 INFLUENZA SEASON/21JUN13//

REF/C/ASD(HA)POLICY 08-005/SUBJECT: POLICY FOR MANDATORY  
SEASONAL INFLUENZA IMMUNIZATION FOR CIVILIAN HEALTH CARE  
PERSONNEL WHO PROVIDE DIRECT PATIENT CARE IN DEPARTMENT OF  
DEFENSE MEDICAL TREATMENT FACILITIES/04APR08//

REF/D/AR 40-5/PREVENTIVE MEDICINE/25MAY2007

REF/E/ARMED FORCES REPORTABLE MEDICAL EVENTS GUIDELINES AND CASE  
DEFINITIONS/MAR2012

1. (U) SITUATION.

1.A. INFLUENZA (FLU) IS A (CON)TAGIOUS RESPIRATORY ILLNESS  
CAUSED BY INFLUENZA VIRUSES. FLU SEASONS ARE UNPREDICTABLE AND  
HAVE THE POTENTIAL TO IMPACT DOD FORCE READINESS AND MISSION. IN  
THE US, INFLUENZA RESULTS IN OVER 25 MILLION REPORTED CASES,  
OVER 150,000 HOSPITALIZATIONS DUE TO SERIOUS COMPLICATIONS, AND  
OVER 30,000 DEATHS ANNUALLY. VACCINATION IS THE PRIMARY METHOD  
FOR PREVENTING INFLUENZA AND ITS COMPLICATIONS.

1.B. FOR THE 2013-2014 INFLUENZA SEASON, THE ARMY PURCHASED 1.8  
MILLION DOSES OF INFLUENZA VACCINE. THIS AMOUNT WILL ENSURE THAT  
ALL SOLDIERS AND BENEFICIARIES ARE PROTECTED AGAINST INFLUENZA.

1.C. FOR THE 2013-2014 INFLUENZA SEASON, IT IS PROJECTED THAT  
MANUFACTURERS WILL BEGIN DELIVERING INFLUENZA VACCINE TO THE  
DEFENSE LOGISTICS AGENCY TROOP SUPPORT IN AUGUST.

1.D. THE CENTERS FOR DISEASE (CON)TROL AND PREVENTION (CDC) AND  
THE ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES (ACIP)  
DEVELOPED RECOMMENDATIONS FOR THE 2013-2014 INFLUENZA SEASON.

THE RECOMMENDATIONS CAN BE FOUND AT  
[HTTP://WWW.CDC.GOV/VACCINES/PUBS/ACIP-11ST.HTM#FLU](http://www.cdc.gov/vaccines/pubs/acip-11st.htm#flu).

1.E. 2013-2014 INFLUENZA TRIVALENT VACCINE STRAINS ARE  
A/CALIFORNIA/07/2009 (H1N1)-LIKE, A/VICTORIA/361/2011 (H3N2)-  
LIKE, AND B/MASSACHUSETTS/2/2012-LIKE ANTIGENS. THE ADDITIONAL  
STRAIN, B/BRISBANE/60/2008-LIKE ANTIGEN, HAS BEEN SELECTED FOR

THOSE MANUFACTURERS LICENSED TO DISTRIBUTE A QUADRIVALENT INFLUENZA VACCINE.

2. (U) MISSION. OFFICE OF THE SURGEON GENERAL (OTSG)/COMMANDER US ARMY MEDCOM (USAMEDCOM), (CON)DUCTS THE 2013-2014 INFLUENZA VACCINE PROGRAM (IVP) IMMEDIATELY UPON RECEIPT OF INFLUENZA VACCINE AT MEDICAL TREATMENT FACILITIES (MTF) IN ORDER TO PROTECT INDIVIDUALS AT RISK OF DEVELOPING INFLUENZA AND ITS COMPLICATIONS.

3. (U) EXECUTION.

3.A. THE INTENT OF THE INFLUENZA PROGRAM IS TO PROTECT ALL ARMY ACTIVE COMPONENT (AC), ARMY NATIONAL GUARD (ARNG), US ARMY RESERVE COMPONENT (USAR) PERSONNEL, MISSION-ESSENTIAL CIVILIANS, HEALTHCARE PERSONNEL, AND TRICARE BENEFICIARIES FROM INFLUENZA AND ITS COMPLICATIONS. THE KEY TASK IS TO IMMEDIATELY VACCINATE PERSONNEL LISTED ABOVE WITH INFLUENZA VACCINE UPON RECEIPT OF VACCINE, EXCLUDING THOSE MEDICALLY EXEMPTED. COMMANDERS ENSURE 100% OF AC, ARNG, USAR PERSONNEL, AND MANDATORY HEALTHCARE PERSONNEL (HCP) (EXCLUDING THOSE MEDICALLY EXEMPT) ARE IMMUNIZED, WITH A MILESTONE REQUIREMENT OF 90% OR GREATER NLT 16 DEC 13.

3.B. IVP IS A COMMANDER'S FORCE HEALTH PROTECTION RESPONSIBILITY. COMMANDERS FOLLOW GUIDANCE NECESSARY TO PROPERLY IDENTIFY AND EDUCATE SERVICE MEMBERS AND TRICARE BENEFICIARIES TO BE VACCINATED, TRACK IMMUNIZATIONS, AND ENSURE APPROPRIATE MEDICAL EVALUATION IF THEY EXPERIENCE ADVERSE REACTIONS FOLLOWING VACCINATION.

3.C. POST AND TRACK ALL VACCINATIONS IN THE MEDICAL PROTECTION SYSTEM (MEDPROS) FOR UNIFORMED PERSONNEL AND DA CIVILIANS. FOR THE PURPOSE OF CAPTURING WORKLOAD, ENTRY INTO THE ARMED FORCES HEALTH LONGITUDINAL TECHNOLOGY APPLICATION (AHLTA) IMMUNIZATION MODULE SHOULD ALSO BE (CON)SIDERED. FOR ALL OTHER BENEFICIARY CATEGORIES, THE AHLTA IMMUNIZATION MODULE WILL BE USED TO DOCUMENT VACCINATIONS.

3.D. DOCUMENT VACCINE ADVERSE EVENTS IN AHLTA AND SUBMIT AN ON-LINE VACCINE ADVERSE EVENT REPORT AT:  
[HTTP://VAERS.HHS.GOV/ESUB/INDEX#ONLINE](http://vaers.hhs.gov/esub/index#online).

3.E. IAW AR 40-5 (REFERENCE D) AND REFERENCE E, MEDICAL LEADERSHIP ENSURES PREVENTIVE MEDICINE ASSETS REPORT CASES OF HOSPITALIZED INFLUENZA AS WELL AS NOVEL INFLUENZA REGARDLESS OF HOSPITALIZATION THROUGH DISEASE REPORTING SYSTEM-INTERNET (DRSI). ACCOUNTS FOR DRSI CAN BE ESTABLISHED BY EMAILING U.S. ARMY PUBLIC HEALTH COMMAND (USAPHC) AT  
[USARMY.APG.MEDCOMPHC.MBX.DISEASE-EPIDEMIOLOGYPROGRAM13@MAIL.MIL](mailto:USARMY.APG.MEDCOMPHC.MBX.DISEASE-EPIDEMIOLOGYPROGRAM13@MAIL.MIL)

3.F. UPON RECEIPT OF SEASONAL INFLUENZA VACCINE, ARMY COMMANDS (ACOMS), ARMY SERVICE COMPONENT COMMANDS (ASCCS), DIRECT

REPORTING UNITS (DRUS), AND USAR AND ARNG UNITS WILL BEGIN VACCINATING.

3.G. PRECLUDING SHORTAGES, NO ELIGIBLE BENEFICIARY IS DENIED IMMUNIZATION.

4. (U) SUSTAINMENT.

4.A. LEADERS REVIEW THE MILITARY VACCINE (MILVAX) AGENCY WEBSITE AT [WWW.VACCINES.MIL/FLU](http://WWW.VACCINES.MIL/FLU) FOR FREQUENTLY ASKED QUESTIONS, INFLUENZA EDUCATIONAL TOOLS, AND REFERENCES.

4.B. VACCINATION STAFF WILL COMPLETE THE ANNUAL SEASONAL INFLUENZA VACCINATION TRAINING AVAILABLE AT [WWW.VACCINES.MIL/FLU](http://WWW.VACCINES.MIL/FLU) PRIOR TO ADMINISTERING THE VACCINES.

4.C. PRIOR TO VACCINATION, SCREEN ALL POTENTIAL VACCINEES UTILIZING A STANDARDIZED SCREENING TOOL AND PROVIDE VACCINEE AN OPPORTUNITY TO READ THE VACCINE INFORMATION STATEMENT (VIS). THE CDC PUBLISHES VIS FOR THE INACTIVATED AND LIVE, ATTENUATED INFLUENZA VACCINES. THE VIS CAN BE DOWNLOADED AND REPRODUCED LOCALLY FROM [HTTP://WWW.VACCINES.MIL/FLU](http://WWW.VACCINES.MIL/FLU).

4.D. THE VACCINE HEALTHCARE CENTERS NETWORK IS AVAILABLE TO ASSIST PATIENTS AND HEALTHCARE PROVIDERS WITH ADVERSE REACTIONS POTENTIALLY (REL)ATED TO VACCINATIONS VIA THE CLINICAL CALL CENTER, COM: 1-866-210-6469, 24-HOURS A DAY.

4.E. THE MILVAX VACCINE INFORMATION CALL CENTER, COM: 1-877-438-8222 IS AVAILABLE FROM 0800 - 1800 HOURS (EASTERN STANDARD TIME), MONDAY THROUGH FRIDAY.

4.F. IMMEDIATELY POST AND TRACK IN MEDPROS ALL VACCINATIONS FOR UNIFORMED PERSONNEL AND DEPARTMENT OF THE ARMY CIVILIANS. ELECTRONIC ENTRY OCCURS AT THE TIME OF VACCINATION OR NLT CLOSE OF BUSINESS THE NEXT DUTY DAY FOLLOWING VACCINATION. PROPER DOCUMENTATION INCLUDES PATIENT IDENTIFICATION; VACCINATION DATE; THE VACCINE NAME OR CODE, MANUFACTURER, LOT NUMBER, VOLUME OF THE DOSE GIVEN, VACCINE ADMINISTRATION ROUTE AND ANATOMIC SITE; NAME, RANK, AND SSN OF PRESCRIBER; VACCINATOR NAME; THE DATE PATIENT WAS PROVIDED THE VIS; AND THE VIS VERSION DATE.

4.F.1. SERVICE MEMBERS WHO RECEIVE INFLUENZA VACCINATIONS FROM NON-MILITARY FACILITIES WILL PROVIDE IMMUNIZATION DOCUMENTATION, AS OUTLINED IN PARA 4.E. ABOVE, TO THEIR UNIT'S MEDPROS POINT OF (CON)TACT NLT THE NEXT DUTY DAY FOLLOWING VACCINATION.

4.F.2. LEADERS AT ALL LEVELS CAN TRACK INDIVIDUAL SERVICE MEMBER AND UNIT COMPLIANCE USING MEDPROS, ACCESSED ON THE INTERNET AT [WWW.MODS.ARMY.MIL](http://WWW.MODS.ARMY.MIL). USERS MAY OBTAIN A LOGON ID DIRECTLY FROM THE WEBSITE OR BY CALLING THE MODS HELP DESK, COM: 1-888-849-4341, DSN: 761-4976, OR EMAIL [MODS-HELP@ASMR.COM](mailto:MODS-HELP@ASMR.COM) FOR ASSISTANCE. COMMANDERS DESIGNATE PERSONNEL TO ROUTINELY ACCESS MEDPROS TO KEEP THEIR UNITS' STATUS CURRENT.

4.F.3. SOLDIERS MAY MONITOR THEIR MEDPROS IMMUNIZATION RECORD BY ACCESSING THEIR ON-LINE IMMUNIZATION RECORD IN ARMY KNOWLEDGE ONLINE (AKO).

4.F.4. THE TRICARE MANAGEMENT ACTIVITY FINAL RULE AUTHORIZING TRICARE RETAIL NETWORK PHARMACIES TO ADMINISTER SEASONAL INFLUENZA AT NO COST TO THE BENEFICIARY REMAINS IN EFFECT FOR THE 2013-2014 SEASON.

5. (U) COMMAND AND SIGNAL.

5.A. MILVAX: MR. BRIAN TWELE, HEALTH SYSTEM SPECIALIST, COM: 703-681-6591, DSN: 761-6591, EMAIL: BRIAN.E.TWELE.CIV@MAIL.MIL

5.B. MILVAX: MR. TODD FURSE, CHIEF, MILVAX OPERATIONS DIVISION, COM: 703-681-5709, DSN: 761-5709, EMAIL: TODD.H.FURSE.CIV@MAIL.MIL

6. EXPIRATION DATE OF THIS MESSAGE IS 30 JUN 2014